MEETING MINUTES

Project Name: IPRS	**Doc. Version No:** 1.0	**Status:** Final

Meeting Name:	IPRS Core Team Meeting
Facilitator:	Travis Nobles
Scribe:	Tim Gwyn
Date:	11/14/2007
Time:	10:30 – 11:00a.m.
Location:	Wycliff – Conference Room 430

IPRS Division - EDS Team Attendees:

X	Rick Kretschmer		**Others:**	
X	Cathy Bennett	X	Mike Frost
X	Cheryl McQueen	X	Jamie Herubin
	Chris Ferrell/Theresa Diana	X	Sandy Flores
	Gary Imes	X	Myran Harris
	Joyce Sims		Tim Sullivan
X	Thelma Hayter	X	Paul Carr
X	Eric Johnson		
X	Travis Nobles		
X	Tim Gwyn		

Attendees:

X	Alamance-Caswell	X	Mecklenburg
X	Albemarle	X	Onslow-Carteret
X	Catawba	×	OPC
X	Centerpoint	X	Pathways
×	Crossroads		Piedmont
X	Cumberland	X	Sandhills Center
X	Durham	X	SE Center
X	Eastpointe	X	SE Regional
X	ECBH		Smoky Mountain
X	Five County MHA	X	The Beacon Center
X	Foothills	X	Wake
×	Guilford	X	Western Highlands
X	Johnston		

Agenda

Area Programs, Division and EDS

1. Roll call
2. Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. **Please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3. Upcoming Check-writes (cut-off dates) – Nov. 15, 29, Dec. 6, 13
4. Agenda items
   - **Timely Filing Cutoff – Deadline 11/15 Checkwrite**
   - **Crisis Fund Denials**
   - **Single Stream Denials**
   - Beta Test (NPI) Requirements Review
     - 100 records/LME/submission; Format test; full cycle run, 835
     - **Update scheduled termination: TBD**
   - IPRS Questions or Concerns
   - MMIS Updates – Chris Ferrell

6. DMH and/or EDS concluding remarks
   a. For **North Carolina Medicaid** claim questions / inquires please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.
      i. Physician phone analyst (i.e. Independent Mental Health Providers)-1
      ii. Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 2
7. Roll Call Updates

Next Meeting

November 28, 2007

For assistance with IPRS claims, adjustments, R2Web, access applications, etc.
Call the IPRS Help Desk - 1-800-688-6696, Option 4 or 919-816-4355
M – F 8:00am - 4:30pm, excluding Holidays

IPRS Question and Answer email address - iprs.qanda@ncmail.net

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	**Topics**
1.	Roll Call
	Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are

2.	from when you speak. **Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3.	**(Travis)** Any questions about last week's checkwrite? None
4.	**AGENDA ITEMS** • **Timely Filing Cutoff: (Travis)** Reminder cutoff deadline is 11/15/07 • **Crisis Fund Denials: (Cheryl)** Some have received EOB 8508. This is due to the new budget criteria not set up yet. Once criteria is in place. DMH will have these reprocessed. • **Single Streams Denials: (Cheryl)** You may have received the EOB 8508 due to all state accounts not loaded. DMH will have these reprocessed. • **Telemedicine:** LMEs will be able to start submitting Friday after this week's Checkwrite. • **Access to reports IPVR0001 and 0002:** These are the Provider Zip+4 update and error reports. For those who were having problems accessing these reports, you should be able to just refresh your security in Report2Web. • **Beta Test (NPI) Requirements Review: (Cheryl)** We received one this week. Some LMEs have yet to test. Please do so ASAP. *IPRS Questions or Concerns* **Naomi (Guilford):** NPI question. As of January 1st for Medicaid, we will need to submit both the Legacy and NPI numbers. Is this correct? **Cheryl (DMH):** This is my understanding according to the email blast sent by Medicaid. As further details are worked out, we will provide. **Thelma (DMH):** My understanding is that as of January 1st, you can continue to send in just the legacy number, but if you send the NPI, you must send in the legacy as well along with the NPI. Is this your understanding? **Naomi (Guilford):** Not sure. Have some questions out to the Medicaid helpdesk to get clarification. **Thelma (DMH):** Pretty sure you can send in just legacy. But if you send NPI, you must have legacy as well. I think Medicaid prefers that both be sent. We will find out for sure tomorrow. **Naomi (Guilford):** But should we be using the new CMS 1500? **Thelma (DMH):** Yes **Agnes (Cumberland):** Wanted to make sure we are billing correctly for a licensed provider billing for state funds. Is it correct to submit the Multi-Specialty Group number and a Medicaid Attending? **Cheryl (DMH):** That's correct. Assuming they are not a physician. **Agnes (Cumberland):** If the consumer we are billing for happens to get Retro-Medicaid, is there anything that would keep it from going over to

Medicaid and processing, correct? They would get a Medicaid payment and not an IPRS payment.

Cheryl (DMH): Correct. The only problem would be that that payment would come to you, the LME. If the claim has already processed in IPRS, we would recoup, so you will not be getting a double payment.

Agnes (Cumberland): But if this is the first time, we bill to IPRS and the claim routes over to Medicaid, we will just have a Medicaid payment.

Cheryl (DMH): Correct. And the payment will come to you and not the provider that is part of the MSG.

Beth (Pathways): IPRS and Medicaid crossover question. On the new community support modifier implementation, are there going to be different rates for paraprofessionals and for the Q code?

Cheryl (DMH): As of right now, no.

Beth (Pathways): Did we find out if the 12/1 effective date is DOS or Billing Date specific?

Cheryl (DMH): DOS.

Beth (Pathways): Heard that Medicaid has put in hard edits for managed and un-managed visits. Has IPRS put edits in for this?

Thelma (DMH): No.

Tom (Western Highlands): There are three different types of community support providers: professional, associate professional and paraprofessional as described in the clinical coverage policy. Is it correct that the U3 represent the professional and the U4 represent the associate and the paraprofessional?

Thelma (DMH): Yes.

Cathy (Centerpoint): For Non-UCR dollars for substance abuse, do we need to send shadow claims or report another way?

Cheryl (DMH): For any client specific service using substance abuse funds, you would need to report using shadow claims.

Cathy (Centerpoint): Claims were denied because we exceeded our public psychiatry funds.

Cheryl (DMH): When you got your allocation, was your budget higher?

Cathy (Centerpoint): Yes

Cheryl (DMH): You will just need to resubmit the denied claims for budget exceeded.

Participant Question: Will IPRS cover services for an illegal immigrant?

Thelma (DMH): We do not require proof of residency to receive service at this time.

Ron (Mecklenburg): Community Support. If there are no changes in rates, will rates need to be submitted for our providers or will the current rates be used?

Cheryl (DMH): Current rates will be used.

Libby (Eastpointe): We have paid services that should have been recouped during the first Checkwrite in November, what should we do with them?

Cheryl (DMH): Please send examples to Q&A and we will research.

Jeanna (Catawba): We have some older services, like in July, that were submitted with a professional billing as provisionally licensed. They are now regularly licensed. Does the old DOS need to submitted under the provisional license rule and can we use the WebTool to submit these?

Cheryl (DMH): Yes.

Tom (Western Highlands): What is the proper way for sending in a provider specific rate?

Cheryl (DMH): There is a rate request form or you can continue to email Kent

Medicaid Questions or Concerns

(Travis)- Are there any Medicaid questions?

No Medicaid questions this week.

Roll Call Updates